#09808243

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

LEAR 0835 PUS

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | | OTHER THAN | | |
|--|---|---------------------------------|------------------|--------------------------|--------------|------------------|----------|--------------------|------------------------|------------|--------------------|------------------------|--|
| TOTAL CLAIMS | | | | | l Con | (Coldinii 2) | | | | OR 7 | | | |
| FOR | | | / & NUMBER FILED | | NI INA | NUMBER EXTRA | | BASIC FEE | FEE 355.00 | lacksquare | RATE | FEE | |
| TOTAL CHARGEABLE CLAIMS | | | , | | NOMBEREATRA | | | DAGIC FEE | 333.00 | OR | BASIC FEE | 710.00 | |
| | | | / 8 minus 20= | | . 0 | | | X\$ 9= | | OR | X\$18= | 0 | |
| | DEPENDENT C | | minus 3 = | | | 0 | | X40= | | OR | X80= | 0 | |
| L | DETIPLE DEPE | NDENT CLAIM P | | | <u> </u> | | | +135= - | | OR | +270= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | column 2 | 1 | TOTAL | | OR | TOTAL | 710 | |
| CLAIMS AS AMENDED - PART II | | | | | | | | OTHER THAN | | | | | |
| _ | | (Column 1) | <u> </u> | (Colum | | (Column 3) | 1 , | SMALL | ENTITY | OR | SMALL | ENTITY | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | NUMI PREVIO PAID | BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | .25 | Minus | 2 | 3 | <u> 2</u> | | X\$ 9= | | OR | X\$18= | 20 | |
| AME | Independent | 1. 2 | Minus | 3 | - | = _ | | X40= | | OR | X80= | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +135= | | OR | +270= | | |
| BEST AVAILABLE COPY | | | | | | | L | TOTAL | | | TOTAL | 7 | |
| SAME (Column 1) 6/21/04 (Column 2) (Column 3) | | | | | | | A | DDIT. FEE | | OR, | ADDIT. FEE | 35 | |
| 8 | , y o | CLAIMS REMAINING | · * · · · | HIGH | EST | | lr | | ADDI- | | | ADDI- | |
| AMENDMENT | +++ | AFTER AMENDMENT | | NUME PREVIO PAID F | USLY | PRESENT EXTRA | | RATE | TIONAL FEE | | RATE | TIONAL FEE | |
| | Total | . 25 | Minus | ** 0 | 25 | = 0 | | X\$ 9= | | OR | X\$18= | 726 | |
| | Independent | NTATION OF MU | Minus | CAIDCAIT |) Cl 0100 | = (5 | | X40= | | OR | X80= | | |
| ш | | THE TOTAL OF THE | CHIPLE DEF | ENDENT | CLAIN | | | +135= | | OR | +270= | | |
| | | | | | | | <u> </u> | TOTAL | | OB L | TOTAL | | |
| | | (Column 1) | | (Colum | ın 2) | (Column 3) | A | ODIT. FEE L | | μ | NDDIT. FEE | | |
| MEN | | CLAIMS REMAINING | | HIGHE NUMB | ST | PRESENT | Г | | ADDI- | ſ | | ADDI- | |
| | • . • | AFTER AMENDMENT | | PREVIO | USLY | EXTRA | | | TIONAL FEE | | RATE | TIONAL | |
| | Total | • | Minus | ** | | = | T | X\$ 9= | | OR | X\$18= | FEE | |
| | Independent | | Minus | *** | | = | H | X40≃ | | . | X80= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | OR | A60= | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Preserve Paid For" IN THIS SPACE is too the entry in column 3. | | | | | | | | | | | | | |
| !! | "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3" | | | | | | | | · · | OR A | TOTAL DDIT, FEE | | |
| T | he "Highest Num | ber Previously Paid | For (Total or | Independer | nt) is the | highest number | found | d in the appr | opriate box | in colu | mn 1. | | |